

## Provider Bulletin

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# Wyoming Department of Health Mental Health & Substance Abuse Services Division

### **Information Only**

# Billing Medicaid for Dually Eligible (Medicare/Medicaid) Clients Who are "Dually Eligible Clients"?

- Dually eligible clients are clients that are eligible for both Medicare and EqualityCare (Medicaid).
- Providers may verify Medicare and EqualityCare eligibility through the ACS IVR system (See the CMS 1500 Professional Services Manual, Section 2.1, Quick Address and Telephone Reference at <a href="http://wyequalitycare.acs-inc.com/manuals/Manual">http://wyequalitycare.acs-inc.com/manuals/Manual</a> CMS.pdf).
- Providers must accept assignment of claims for dually eligible clients.
- EqualityCare reimburses providers for 100% of deductible amounts and 100% of coinsurance amounts due on Medicare covered services for dually eligible clients.

#### Why is it important for EqualityCare providers to verify dual eligibility?

- <u>Medicare is primary and must be billed first</u>. Please direct Medicare claims processing questions to the Medicare carrier. For Wyoming clients you may access Medicare information at the Noridian Administrative Services site: <a href="https://www.noridianmedicare.com">https://www.noridianmedicare.com</a>
- When posting the Medicare payment, the EOMB (Explanation of Medicare Benefits) may state that the claim has been forwarded to EqualityCare. No further action is required, it has automatically been submitted.
- Medicare transmits electronic claims to EqualityCare daily.
- If payment is not received from EqualityCare after 45 days of the Medicare payment, submit a paper claim to EqualityCare. The line items on the paper claim being submitted to EqualityCare must be exactly the same as the claim submitted to Medicare and have the Medicare EOMB attached.
- The time limit for filing Medicare crossover claims to EqualityCare is twelve months from the date of service or six months from the date of the Medicare payment, whichever is later.

**NOTE:** Do not file a claim for coinsurance or deductible amounts unless you have waited 45 days from Medicare's payment date. A provider's claims may be returned if submitted without waiting the 45 days after the Medicare payment date.

#### What services does Medicare cover?

Questions concerning a client's Medicare eligibility should be directed to the Social Security Administration (SSA) office closest to the client's permanent place of residence.



### Thank you for your courtesies.

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